

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

0/0	7/							
OMB APPROVAL								
OMB No.	3235- 0076							
Expires: May 31, 2005 Estimated average burden hours per response1								
SEC U	ISE ONL	Υ.						
Prefix		Serial						
DATE F	RECEIVE	ED						

Name of Offering (  chec		nendment and na c. – Founders Fir	-	d, and indica	te change.)	
Filing Under (Check box(es	) that apply):	☑ <u>Rule 504</u>	☑ <u>Rule 505</u>	☑ Rule 5	06 ☑ Section 4	(6) 🗹 ULOE
Type of Filing: ☑ New Filing	g 🗆 Amend	lment				
		A. BASIC	IDENTIFICATION	ON DATA		
1. Enter the information req	uested about th	ne issuer			04	1051420
Name of Issuer ☐ (check if	this is an ame	ndment and name	has changed, a	and indicate	change.) Omni-\	/MS, Inc.
Address of Executive Office 4909 East Wasatch Drive,		er and Street, City, 92807	, State, Zip Code	e)	Telephone Numb (714) 429-4620	er (Including Area Code)
Address of Principal Busine (if different from Executive			eet, City, State,	Zip Code)		er (Including Area Code)
Brief Description of Busines insurance management c					DEC	03 <b>200</b> 4.
Type of Business Organiza	tion				THK FIN	OMSON IANCIAL
☑ corporation	☐ limited	I partnership, alrea	ady formed	☐ other (pl	ease specify): De	laware corporation
☐ business trust	☐ limited	I partnership, to be	e formed			
			Month	Year		
Actual or Estimated Date of	Incorporation	or Organization:	[05]	[03]	🗹 Actual 🔲 E	Estimated
Jurisdiction of Incorporation		n: (Enter two-lette N for Canada; FN				
CENEDAL INSTRUCTIONS						

### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee.

### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

### A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

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- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☑ Promoter ☑ Beneficial Owner ☑ Executive Officer ☑ Director ☐ General and/or Managing Member
Full Name (Last name first, if individual) Ross Fisher
Business or Residence Address (Number and Street, City, State, Zip Code) 4909 East Wasatch Drive, Anaheim, CA 92807
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☑ Executive Officer ☑ Director ☐ General and/or Managing Member
Full Name (Last name first, if individual) Kim Huempfner
Business or Residence Address (Number and Street, City, State, Zip Code) 4909 East Wasatch Drive, Anaheim, CA 92807
Check Box(es) that Apply:  Promoter Beneficial Owner Executive Officer Director General and/or Managing Member
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:   Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Member
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:  Promoter Beneficial Owner Executive Officer Director General and/or Managing Member
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Member
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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					В.	INFORM	ATION A	BOUT O	FERING						
1. Has	the issu	er sold, c	or does th	ne issuer	intend to	sell, to no	on-accred	dited inves	stors in thi	s offering	?		Yes□	No 🗹	
				An	swer also	o in Appe	ndix, Colu	umn 2, if f	iling unde	r ULOE.					
						•	•						\$N/A		
3. Doe	s the offe	ering per	mit joint o	ownershi	p of a sing	gle unit?.		••••••					Yes☑	No 🗆	
any o offeri and/o	commissiing. If a por or with a	on or sin erson to state or	nilar remu be listed states, lis	uneration d is an as st the na	for solici ssociated me of the	tation of p person of broker o	ourchaser or agent c or dealer.	rs in conn of a broke If more th	ection witl r or deale an five (5	n sales of r register b) persons	ctly or ind securities ed with the s to be list or dealer of	s in the le SEC ted are			
Full Na	ame (Las	t name fi	rst, if ind	ividual)	N/A										
Busine	ss or Re	sidence .	Address	(Number	and Stre	et, City, S	State, Zip	Code)							
Name	of Assoc	iated Bro	ker or D	ealer	N/A										
						ends to S	olicit Purc	hasers			A11 O4-4-	_			
			neck indi		•	ron.	וחריו	(DC)	(E) 1		All States				
[AL]	[AK]	[AZ]	[AR] [KS]	[CA] [KY]	[CO]	[CT]	[DE] [MD]	[DC]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	1		
[IL] [MT]	[IN] [NE]	[IA] [NV]	[NH]	[NJ]	[LA] [NM]	[ME] [NY]	[NC]	[MA] [ND]	[OH]	[OK]	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[\T]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
Full Na	ame (Las	t name fi	rst, if ind	ividual)	N/A				-			<u> </u>			
Busine	ess or Re	sidence	Address	(Number	and Stre	et, City, S	State, Zip	Code)							
Name	of Assoc	iated Bro	ker or D	ealer	N/A	·									
						ends to Se	olicit Purc	hasers			AU 04-4-	_			
•			neck indi			(CT)	ייסבו	(DC)	(C)		All States				
[AL]	[AK] [IN]	[AZ]	[AR] [KS]	[CA] [KY]	[CO]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	ı		
[IL] [MT]	[NE]	[IA] [NV]	[NH]	[NJ]	[LA] [NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
Full Na	ame (Las	t name fi	rst, if ind	ividual)	N/A										
Busine	ess or Re	sidence	Address	(Number	and Stre	et, City, S	State, Zip	Code)							
Name	of Assoc	iated Bro	ker or D	ealer	N/A										
						ends to So	olicit Purc	hasers							
		tes" or ch	neck indi		ates)						All States				
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an					
exchange offering, check this box $\square$ and indicate in the columns below the amounts of	•				
the securities offered for exchange and already exchanged.		Aggregate		Αn	nount Already
Type of Security		Offering Price			Sold
Debt	\$_	-0-	\$.		0
Equity	\$_	5,000	\$		5,000
[x]Common []Preferred					
Convertible Securities (including warrants)	\$	-0-	\$.		-0-
Partnership Interests	\$_	-0-	\$		-0-
Other (Specify)	\$_	-0-	\$		-0-
Total	\$_	5,000	\$		5,000
Answer also in Appendix, Column 3, if filing under ULOE.					
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	ļ				Aggragata
	N	lumber Investors	:	Do	Aggregate ollar Amount f Purchases
Accredited Investors		_	\$	-	10,000
Non-accredited Investors					
Total (for filings under Rule 504 only)					10,000
Answer also in Appendix, Column 4, if filing under ULOE.			Ψ.		10,000
If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	:				
Tuna of affaring	٦	Гуре of Security		D	ollar Amount
Type of offering			ŵ		Sold
Rule 505			Ф.		-0-
Regulation A			\$.		0
Rule 504	_		\$.		-0-
Total			<b>\$</b> .		-0-
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	i !				
Transfer Agent's Fees		□ \$ <u></u> _		-	
Printing and Engraving Costs		□ \$ <u></u>			
Legal Fees		<b>☑</b> \$ 2,00	0		
Accounting Fees		□ \$ <u></u>		_	
Engineering Fees		□ \$		-	
Sales Commissions (specify finders' fees separately)		□ \$		•	
		_ :		•	
Other Expenses (identify)		□ \$ <u></u>		•	
Total		<b>☑</b> \$ <u>2,00</u>	<u>)                                     </u>		

C. OFFERING PRICE, NUMBER O	F INVESTORS, EXPENSES AND	JOE OF F	NOCEED3	
o. Enter the difference between the aggregate offering p	orice diven in response to Part C			,
Question 1 and total expenses furnished in respon difference is the "adjusted gross proceeds to the issue	se to Part C - Question 4.a. This		\$8,000	0
5. Indicate below the amount of the adjusted gross proce to be used for each of the purposes shown. If the am furnish an estimate and check the box to the left payments listed must equal the adjusted gross processes to Part C - Question 4.b above.	ount for any purpose is not known of the estimate. The total of the	, <del>)</del>		
			nents to	
		Direc	icers, ctors, & iliates	Payments To Others
Salaries and fees		□ \$		□ \$
Purchase of real estate		□ \$		<b></b> \$
Purchase, rental or leasing and installation of machin	nery and equipment	□ \$		□ \$
Construction or leasing of plant buildings and facilitie	es	□ \$		<b>\$</b>
Acquisition of other businesses (including the value of offering that may be used in exchange for the assets pursuant to a merger)	<b></b> \$		<b>\$</b>	
Repayment of indebtedness	□ \$		□ \$	
Working capital	□ \$		<b>☑</b> \$ <u>8,000</u>	
Other (specify):		□ \$		□ \$
		□ \$		□ \$
Column Totals		□ \$		☑ \$8,000
Total Payments Listed (column totals added)		<b></b>		000
Total Faymonia Elated (ceramin totale dadaa)			<u>υ</u> ψ <u>υ,υ</u>	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
D. I	FEDERAL SIGNATURE			
The issuer has duly caused this notice to be signed by the following signature constitutes an undertaking by the issuer request of its staff, the information furnished by the issuer	er to furnish to the U.S. Securities a	nd Exchar	nge Commi:	ssion, upon written
ssuer (Print or Type)	Signature		Date	
Omni-VMS, Inc.	10		No	ovember 16, 2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
Ross Fisher	President			
	ATTENTION			

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE	
Is any party described in 17 CFR 230.262 progrule?	esently subject to any of the disqualification	provisions of such Yes□ No☑
	ee Appendix, Column 5, for state response.	
2. The undersigned issuer hereby undertakes form D (17 CFR 239.500) at such times as		state in which this notice is filed, a notice on
3. The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the state administrators, upon	written request, information furnished by the
<ol> <li>The undersigned issuer represents that the limited Offering Exemption (ULOE) of the sta this exemption has the burden of establishin</li> </ol>	ate in which this notice is filed and understa	nds that the issuer claiming the availability of
The issuer has read this notification and knows undersigned duly authorized person.	the contents to be true and has duly cause	d this notice to be signed on its behalf by the
Issuer (Print or Type)	Signature	Date
Omni-VMS, Inc.		November 16, 2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)	

President

### Instruction:

**Ross Fisher** 

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## **APPENDIX**

								i i		
1 1	2		3	3 4				5		
	_				Disqualification under State ULOE					
			Type of security							
	Intend t		and aggregate					(if yes,		
	to non-acc		offering price		Type of inve	estor and		explana	tion of	
	investors		offered in state		amount purcha			waiver g	ranted)	
	(Part B-I	tem 1)	(Part C-Item 1)		(Part C-It	em 2)		(Part E-l	tem 1)	
				Number of		Number of				
				Accredited		Non-Accredited			grid garden	
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
AL										
AK										
			Common Stock:		Common Stock:					
AZ		Х	\$5,000	1	\$5,000				Х	
AR			, , , , , , , ,							
			Common Stock:		Common Stock:					
CA		Х	\$5,000	1	\$5,000				X	
СО			Ψο,σοσ		Ψο,σσσ					
СТ										
DE										
DC										
FL										
GA										
HI										
ID										
IL										
IN					uus muunninolus aurusado kijim delasta es seessa					
IA										
KS										
KY										
LA										
ME										
MD										
MA										
МІ										
MN		,								
MS										
МО										
MT										
								CHI MANAGEMENT DE LA CONTRACTOR DE LA CO		
NE										
NV										
NH										
NJ										
NM										
NY										
NC										
ND										
ОН										
OK										
OR										
PA										

1	Intend to non-acconvestors (Part B-I	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				ication te ULOE attach tion of ranted) tem 1)
RI					and the latest and the same and			
SC								
SD								
TN								
TX								
UT								
VT								
VA								
WA								
WV								
WI								
WY								
PR								